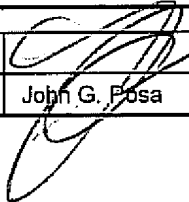


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2008</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/664,244-Conf. #3743
		Filing Date	September 17, 2003
		First Named Inventor	Kinya Washino
		Examiner Name	J. P. Salce
		Art Unit	2623
TOTAL AMOUNT OF PAYMENT (\$) 460.00		Attorney Docket No.	FNI-02902/03

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>07-1180</u> Deposit Account Name: <u>Gifford, Krass, Sprinkle,</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																			
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)												
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)													
Utility	310	155	510	255	210	105													
Design	210	105	100	50	130	65													
Plant	210	105	310	155	160	80													
Reissue	310	155	510	255	620	310													
Provisional	210	105	0	0	0	0													
2. EXCESS CLAIM FEES							Small Entity												
							Fee (\$)												
Each claim over 20 (including Reissues)							50												
Each independent claim over 3 (including Reissues)							210												
Multiple dependent claims							370												
							Fee (\$)												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Total Claims</u></td> <td style="width: 20%;"><u>Extra Claims</u></td> <td style="width: 20%;"><u>Fee (\$)</u></td> <td style="width: 20%;"><u>Fee Paid (\$)</u></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____ x _____ = _____</td> <td>_____</td> <td></td> <td></td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			_____	_____	_____ x _____ = _____	_____			
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																
_____	_____	_____ x _____ = _____	_____																
HP = highest number of total claims paid for, if greater than 20.																			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Indep. Claims</u></td> <td style="width: 20%;"><u>Extra Claims</u></td> <td style="width: 20%;"><u>Fee (\$)</u></td> <td style="width: 20%;"><u>Fee Paid (\$)</u></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____ x _____ = _____</td> <td>_____</td> <td></td> <td></td> </tr> </table>							<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			_____	_____	_____ x _____ = _____	_____			
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																
_____	_____	_____ x _____ = _____	_____																
HP = highest number of independent claims paid for, if greater than 3.																			
3. APPLICATION SIZE FEE																			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Total Sheets</u></td> <td style="width: 20%;"><u>Extra Sheets</u></td> <td style="width: 20%;"><u>Number of each additional 50 or fraction thereof</u></td> <td style="width: 20%;"><u>Fee (\$)</u></td> <td style="width: 20%;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____ / 50 = _____ (round up to a whole number)</td> <td>_____ x _____ = _____</td> <td></td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____	_____	_____ / 50 = _____ (round up to a whole number)	_____ x _____ = _____			
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>															
_____	_____	_____ / 50 = _____ (round up to a whole number)	_____ x _____ = _____																
4. OTHER FEE(S)																			
Non-English Specification, \$130 fee (no small entity discount)																			
Other (e.g., late filing surcharge): <u>1252 Extension for response within second month</u>							460.00												

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	37,424
Name (Print/Type)	John G. Posa	Telephone	(248) 647-6000
		Date	March 27, 2008